

08/515379



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: ZOMD 1039

In re Application

PATENT APPLICATION

Inventor(s): Gough et al.

Application No.: Not yet assigned

Filed: August 15, 1995

Title: MULTIPLE ANTENNA ABLATION APPARATUS

CERTIFICATE OF MAILING BY "EXPRESS MAIL"  
UNDER 37 C.F.R. § 1.10

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Sonia R. Rebelo \_\_\_\_\_ (Signature)  
\_\_\_\_\_  
Signature Date: August 15, 1995 \_\_\_\_\_ (Type Name)

APPLICATION TRANSMITTAL LETTER

Assistant Commissioner for Patents  
Washington, D.C. 20231  
Attn: **BOX PATENT APPLICATION**

Sir:

Transmitted herewith for filing is the patent application identified as follows:

| - 00 | *ET AL* Inventor(s): Edward J. Gough and Alan A. Stein

Title: MULTIPLE ANTENNA ABLATION APPARATUS

No. of pages in Specification: 26; No. of Claims: 46.

No. of Sheets of Drawings: 8; Formal:       , Informal: x.

### Patent Application Filing Fee

The patent application filing fee (if applicable) is calculated as shown below:

C L A I M S					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					\$ 750.00
Total Claims	46	MINUS 20=	26	x \$22 =	572.00
Independent Claims	2	MINUS 3 =	0	x \$78 =	0.00
If multiple dependent claims are presented, add \$250.00					0.00
Total Application Fee (LARGE ENTITY)					1,322.00
If verified statement claiming small entity status is enclosed, subtract 50% of Total Application Fee					661.00
PATENT APPLICATION FILING FEE					661.00

### Total Fee

The Total Fee associated with this communication has been calculated as shown below:

<input checked="" type="checkbox"/> Patent application filing fee	\$ 661.00
<input checked="" type="checkbox"/> Net fee for extension of time	\$ 55.00
<input checked="" type="checkbox"/> Assignment Recordation fee	\$ 40.00
<input checked="" type="checkbox"/> Surcharge under 37 C.F.R. §1.16(e) for late filing of oath or declaration	
<input type="checkbox"/> Large Entity	\$ 130.00
<input checked="" type="checkbox"/> Small Entity	\$ 65.00

TOTAL FEE DUE: \$ 821.00

**Method of Payment of Fees**

- A check in the amount of the TOTAL FEE DUE is enclosed.
- The Commissioner is hereby authorized to charge underpayment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 08-1405. A duplicate copy of this authorization is enclosed.

Date: 11/22/95

Respectfully submitted,

By:

  
Paul Davis  
Reg. No.: 29,294

HAYNES & DAVIS  
2180 Sand Hill Road, Suite 310  
Menlo Park, California 94025-6935  
Telephone: (415) 233-0188